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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:		Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar	e the name that is on government-issued ure identification (for nple, your driver's use or passport).	Debbie First name D. Middle name	First name Middle name
	Bring your picture identification to your meeting with the trustee.		Jones Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ide your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security ober or federal vidual Taxpayer tification number	xxx-xx-6306	

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Case number (if known) Debtor 1 Debbie D. Jones

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs. Business name(s)			
	Include trade names and doing business as names	Business name(s)				
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		2712 Ridge Avenue Rockford, IL 61103				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Winnebago County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known) Debtor 1 Debbie D. Jones

Par	Tell the Court About	our E	Sankruptcy Ca	se			
7.	The chapter of the Bankruptcy Code you are				n of each, see <i>Notice Required by 1</i> of page 1 and check the appropriate	1 U.S.C. § 342(b) for Individuals Filing for Bankruptcy box.	
	choosing to file under	■ Chapter 7					
		□ с	hapter 11				
		□с	hapter 12				
		□с	hapter 13				
8.	How you will pay the fee		about how yo	u may pay. Ty attorney is sub	pically, if you are paying the fee you	with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money lf, your attorney may pay with a credit card or check with	
					stallments. If you choose this option of the control of the contro	n, sign and attach the Application for Individuals to Pay	
			ū		,	only if you are filing for Chapter 7. By law, a judge may,	
		_	but is not requapplies to you	uired to, waive Ir family size a	your fee, and may do so only if you and you are unable to pay the fee in	Ir income is less than 150% of the official poverty line the installments). If you choose this option, you must fill out al Form 103B) and file it with your petition.	
9.	Have you filed for bankruptcy within the	■ No	D.				
	last 8 years?	□ Ye	es.				
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy	■ No	o				
	cases pending or being filed by a spouse who is not filing this case with	□ Ye	es.				
	you, or by a business partner, or by an affiliate?						
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	■ No	Go to li	ne 12.			
	residence :	□ Ye	es. Has yo	ur landlord obt	tained an eviction judgment against	you?	
				No. Go to line	: 12.		
				Yes. Fill out II bankruptcy pe		udgment Against You (Form 101A) and file it with this	

Document Page 4 of 55 Case number (if known) Debtor 1 Debbie D. Jones Report About Any Businesses You Own as a Sole Proprietor Are you a sole proprietor ■ No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

immediate attention?
For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Debtor 1 Debbie D. Jones Document Page 5 of 55 Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Der	Debbie D. Jones						
Par	6: Answer These Quest	ions for R	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." □ No. Go to line 16b.				
		16b.	Yes. Go to line 17.	ousiness debts? Business debts are debt	to that you incurred to obtain		
		100.		estment or through the operation of the bu			
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you	owe that are not consumer debts or busing	ess debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	r 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and	■ Yes.		Do you estimate that after any exempt provailable to distribute to unsecured creditor	operty is excluded and administrative expenses s?		
	administrative expenses		■ No				
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes				
18.	How many Creditors do you estimate that you owe?	■ 1-49		☐ 1,000-5,000	□ 25,001-50,000		
		☐ 50-99		□ 5001-10,000	5 0,001-100,000		
		☐ 100-19 ☐ 200-9		□ 10,001-25,000	☐ More than100,000		
19.	How much do you	\$ 0 - \$1	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion		
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion		
20.	How much do you estimate your liabilities	\$0 - \$	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	to be?		01 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion		
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion		
Par	7: Sign Below						
For	you	I have ex	amined this petition, and I de	clare under penalty of perjury that the info	ormation provided is true and correct.		
				7, I am aware that I may proceed, if eligibl relief available under each chapter, and I	e, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.		
				not pay or agree to pay someone who is not notice required by 11 U.S.C. § 342(b).	not an attorney to help me fill out this		
		I request	relief in accordance with the	chapter of title 11, United States Code, sp	pecified in this petition.		
		bankrupto and 3571	cy case can result in fines up	t, concealing property, or obtaining money to \$250,000, or imprisonment for up to 20	or property by fraud in connection with a pyears, or both. 18 U.S.C. §§ 152, 1341, 1519,		
			oie D. Jones D. Jones		tor 2		
			e of Debtor 1	Oignature of Deb	··· -		
		Executed		Executed on			
			MM / DD / YYYY	M	M / DD / YYYY		

Debtor 1 Debbie D. Jones Document Page 7 of 55

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Daniel	A. Springer	Date	December 6, 2017
Signature of	Attorney for Debtor		MM / DD / YYYY
Daniel A. S	Springer		
Printed name			
Springer L	.aw Firm		
Firm name			
5301 E. St	ate Street		
Suite 105			
Rockford,	IL 61108		
Number, Street,	City, State & ZIP Code		
Contact phone	815.312.4725	Email address	dspringerlaw@gmail.com
6314059			
Bar number & St	tato		

			eni Paue o Ul 33	
ill in this infor	mation to identify your	case:		
Debtor 1	Debbie D. Jones			
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number f known)				

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as Value o	ssets f what you own
١.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	29,439.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	29,439.00
ar	t 2: Summarize Your Liabilities		
		Your lia	abilities you owe
	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	13,957.00
	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	36,022.38
	Your total liabilities	\$	49,979.38
ar	t 3: Summarize Your Income and Expenses		
	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,748.39
	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,722.00
ar	t 4: Answer These Questions for Administrative and Statistical Records		
	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	edules.
	■ Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$	0.00
		1 -	

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	i otai ciaim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Case 17-82871 Doc 1 Filed 12/06/17 Entered 12/06/17 12:50:29 Desc Main Page 10 of 55 Document Fill in this information to identify your case and this filing: Debtor 1 Debbie D. Jones Middle Name First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Chevrolet Make: Who has an interest in the property? Check one 3 1 the amount of any secured claims on Schedule D: Malibu Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2014 Debtor 2 only Current value of the Current value of the 72,000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another Debtor's daughter's vehicle. \$11,100.00 \$11,100.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$11,100.00 pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B Schedule A/B: Property

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Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Do not deduct secured

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De	btor 1 Debbie D. Jo	nes			- age 12 or	Case number (if known)	
							claims or exemptions.
ļ	Cash Examples: Money you h □ No ■ Yes	•	, ,		•	and when you file your petition	
						Cash on hand from Worker's Comp Settlement Debtor received December 4, 2017.	\$13,500.00
				with the same ins	titution, list each.	in credit unions, brokerage ho	uses, and other similar
١	Yes			Institution r	ame:		
		17.1. Ch	ecking	PNC Ban	ĸ		\$9.00
	Bonds, mutual funds, e Examples: Bond funds,			kerage firms, mor	ey market accour	nts	
	□ Yes	Instit	ution or issuer n	name:			
_	joint venture	ock and inter	ests in incorpo	rated and uninco	orporated busine	esses, including an interest i	n an LLC, partnership, and
	■ No □ Yes. Give specific info	ormation abou	t them				
	= 100. Olve specific file	Name of				% of ownership:	
	Government and corpo Negotiable instruments Non-negotiable instrum	include perso	nal checks, cash	niers' checks, pro	missory notes, and	d money orders.	
ı	☐ Yes. Give specific info	rmation about Issuer na					
			anie.				
	Retirement or pension Examples: Interests in I No		eogh, 401(k), 40	03(b), thrift saving	s accounts, or oth	ner pension or profit-sharing pla	ans
ı	☐ Yes. List each accoun	t separately. Type of acc	count:	Institution r	ame:		
	Security deposits and Your share of all unused Examples: Agreements ☐ No	d deposits you	have made so			se from a company telecommunications companie	s, or others
١	Yes			Institution r	ame or individual:	:	
		Rent		Current L	andlord		\$900.00
23.	Annuities (A contract fo	r a periodic pa	syment of mone	y to you, either for	life or for a numb	per of years)	
-	No					• •	
	☐ Yes Iss	suer name and	ւ սեշտրասու				
24.	Interests in an education 26 U.S.C. §§ 530(b)(1), 5	on IRA, in an a 529A(b), and 5	account in a qu 29(b)(1).	ialified ABLE pro	gram, or under a	a qualified state tuition prog	ram.

		Case 17-82871	Doc 1	Filed 12/06/17 Document	Page 13 of 55		Desc Main
De	ebtor 1	Debbie D. Jones			c	ase number (if known)	
	■ No □ Yes	Institution na	ame and desc	cription. Separately file th	ne records of any interes	sts.11 U.S.C. § 521(c)	:
25.	Trusts,	equitable or future intere	ests in prope	rty (other than anythin	g listed in line 1), and	rights or powers exe	ercisable for your benefit
	■ No □ Yes.	Give specific information a	about them				
	Examp ■ No	s, copyrights, trademarks les: Internet domain name	s, websites, p			s	
	☐ Yes.	Give specific information a	about them				
	Examp ■ No	es, franchises, and other oles: Building permits, exclu Give specific information a	usive licenses		n holdings, liquor license	es, professional licens	es
M	onev or i	property owed to you?					Current value of the
101	oney or p	property owed to you.					portion you own? Do not deduct secured claims or exemptions.
	■ No	unds owed to you Give specific information a	hout them, inc	Sluding whether you alre	ady filed the returns and	the tay years	
	— 103.	Give specific information a	bout thom, in	sidding whether you allo	ady med the returns and	Tille tax years	
	Examp ☐ No	support les: Past due or lump sum Give specific information		usal support, child supp	ort, maintenance, divorc	e settlement, property	settlement
			Bac	k Child Support			
			Bac	k Child Support		Child Support	Unknown
	Examp ■ No	amounts someone owes oles: Unpaid wages, disabil benefits; unpaid loans	you ity insurance s you made to	payments, disability ben	efits, sick pay, vacation		
	■ No □ Yes.	oles: Unpaid wages, disabil benefits; unpaid loans	you ity insurance s you made to	payments, disability ben someone else		pay, workers' compe	nsation, Social Security
31.	■ No □ Yes. Interest Examp	oles: Unpaid wages, disabil benefits; unpaid loans Give specific information ts in insurance policies oles: Health, disability, or lif	you ity insurance s you made to se insurance; h	payments, disability ben someone else nealth savings account (pay, workers' compe	nsation, Social Security
31.	■ No □ Yes. Interest Examp	oles: Unpaid wages, disabil benefits; unpaid loans Give specific information ts in insurance policies oles: Health, disability, or lif	you ity insurance s you made to se insurance; h	payments, disability ben someone else nealth savings account (pay, workers' compe	nsation, Social Security
31.	■ No □ Yes. Interest Examp ■ No □ Yes. I Any int If you a someo ■ No	oles: Unpaid wages, disabil benefits; unpaid loans Give specific information ts in insurance policies oles: Health, disability, or lif	you ity insurance is you made to fe insurance; h any of each p apany name: due you from any trust, expect	payments, disability ben someone else nealth savings account (olicy and list its value.	HSA); credit, homeowne Beneficiary	pay, workers' compe er's, or renter's insurar	nsation, Social Security nce Surrender or refund value:
31.	■ No □ Yes. Interest Examp ■ No □ Yes. I Any int If you a someo ■ No □ Yes. Claims	oles: Unpaid wages, disabil benefits; unpaid loans Give specific information ts in insurance policies oles: Health, disability, or lif Name the insurance comp Com terest in property that is of are the beneficiary of a livir one has died.	you ity insurance is you made to fe insurance; if any of each p inpany name: due you from ing trust, expect	payments, disability ben someone else nealth savings account (olicy and list its value. I someone who has dient proceeds from a life in you have filed a lawsu	HSA); credit, homeowned Beneficiary and surance policy, or are continuous and the continu	pay, workers' compe er's, or renter's insurar /: urrently entitled to rec	nsation, Social Security nce Surrender or refund value:
31.	■ No □ Yes. Interest Examp ■ No □ Yes. I Any int If you a someo ■ No □ Yes. Claims Examp □ No	bles: Unpaid wages, disabil benefits; unpaid loans Give specific information ts in insurance policies bles: Health, disability, or lif Name the insurance comp Com terest in property that is of are the beneficiary of a living has died. Give specific information against third parties, wh	you ity insurance is you made to se insurance; if any of each propany name: due you from the first trust, expected the content of the content disputes, in	payments, disability ben someone else nealth savings account (olicy and list its value. I someone who has dient proceeds from a life in you have filed a lawsu	HSA); credit, homeowned Beneficiary and surance policy, or are continuous and the continu	pay, workers' compe er's, or renter's insurar /: urrently entitled to rec	nsation, Social Security nce Surrender or refund value:
31.	■ No □ Yes. Interest Examp ■ No □ Yes. I Any int If you a someo ■ No □ Yes. Claims Examp □ No	bles: Unpaid wages, disabil benefits; unpaid loans Give specific information ts in insurance policies bles: Health, disability, or lift Name the insurance comp Com terest in property that is of are the beneficiary of a living has died. Give specific information against third parties, wholes: Accidents, employment	you ity insurance is you made to se insurance; if any of each property name: due you from the first trust, expected the there or not the disputes, in	payments, disability ben someone else nealth savings account (olicy and list its value. I someone who has dient proceeds from a life in you have filed a lawsu surance claims, or rights ors Compensation C	HSA); credit, homeowned Beneficiary and surance policy, or are continuous and the strange and demand for the strange and the s	pay, workers' comperer's, or renter's insurant or payment	nsation, Social Security nce Surrender or refund value:

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Case number (if known) Document Debtor 1 Debbie D. Jones 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No $\hfill \square$ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$14,409.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Part 6 Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 56. \$11,100.00 Part 3: Total personal and household items, line 15 57. \$3,930.00 Part 4: Total financial assets, line 36 \$14,409.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00

Official Form 106A/B Schedule A/B: Property page 5

\$29,439.00

Copy personal property total

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$29,439.00

\$29,439,00

		DUGUITIC	III FAU C 13 OLSS		
Fill in this infor	mation to identify your	case:			
Debtor 1	Debbie D. Jones				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check if this is an amended filing	

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the /	Prop	perty	You	Claim	as	Exemp	ot
---------	----------	-------	------	-------	-----	-------	----	-------	----

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2014 Chevrolet Malibu 72,000 miles Debtor's daughter's vehicle.	\$11,100.00		\$2,400.00	735 ILCS 5/12-1001(c)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Household Furniture Line from Schedule A/B: 6.1	\$1,300.00		\$1,300.00	735 ILCS 5/12-1001(b)
Line nom <i>Schedule A/B</i> . G. 1			100% of fair market value, up to any applicable statutory limit	
Books, Pictures Line from Schedule A/B: 8.1	\$600.00		\$600.00	735 ILCS 5/12-1001(b)
Line Holli Galledale A.B. G. I			100% of fair market value, up to any applicable statutory limit	
Used Clothing Line from Schedule A/B: 11.1	\$2,000.00		\$2,000.00	735 ILCS 5/12-1001(a)
Line Iron Scredule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
Costume Jewelry Line from Schedule A/B: 12.1	\$30.00		\$30.00	735 ILCS 5/12-1001(b)
Line nom Scriedule A/D. 12.1			100% of fair market value, up to any applicable statutory limit	

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Case number (if known)

טפ	DEDDIE D. JOHES					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	Cash on hand from Worker's Comp Settlement Debtor received	\$13,500.00		100%	820 ILCS 305/21	
Ī	December 4, 2017. Line from Schedule A/B: 16.1			100% of fair market value, up to any applicable statutory limit		
	Checking: PNC Bank Line from Schedule A/B: 17.1	\$9.00		\$9.00	735 ILCS 5/12-1001(b)	
L	Line IIIIII Schedule PAB. 17.1			100% of fair market value, up to any applicable statutory limit		
	Child Support: Back Child Support Line from Schedule A/B: 29.1	Unknown		100%	735 ILCS 5/12-1001(g)(4)	
	Line Holli Schedule PAB. 23.1			100% of fair market value, up to any applicable statutory limit		
	Workers Compensation Claim (Debtor has retained Greg Tuitte).	Unknown		100%	735 ILCS 5/12-1001(h)(2)	
	Line from Schedule A/B: 33.1			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustmer	nt.)	
	■ No					
	☐ Yes. Did you acquire the property cover	ed by the exemption wi	ithin 1	,215 days before you filed this case	?	
	□ No					
	☐ Yes					

Ou	00 17 02011	Document Pa	age 17 (of 55	50.25 BC50 N	iani
Fill in this inform	mation to identify you					
Debtor 1	Debbie D. Jones					
	First Name		Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name Las	Name			
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT OF ILLINOI	S			
Case number						
(if known)					☐ Check	if this is an
					amend	led filing
Be as complete and is needed, copy the number (if known).	d accurate as possible. I e Additional Page, fill it c	Who Have Claims See f two married people are filing together, bo out, number the entries, and attach it to thi	oth are equa	lly responsible for su	pplying correct informa	
1. Do any creditors	have claims secured by	your property?				
☐ No. Check	k this box and submit th	nis form to the court with your other sche	dules. You	have nothing else t	o report on this form.	
Yes. Fill in	all of the information b	pelow.				
Part 1: List A	II Secured Claims					
2. List all secured	claims. If a creditor has n	nore than one secured claim, list the creditor	separately	Column A	Column B	Column C
		a particular claim, list the other creditors in Pecal order according to the creditor's name.	art 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Citizens F		Describe the property that secures the cl	aim:	\$13,957.00	\$11,100.00	\$2,857.00
Creditor's Name	e	2014 Chevrolet Malibu 72,000 m Debtor's daughter's vehicle.	iles			

2.1 Citizens Finance	·	Describe the property that secures the claim:	value of collateral. \$13,957.00	claim \$11,100.00	If any \$2,857.00
Creditor's Name		2014 Chevrolet Malibu 72,000 miles Debtor's daughter's vehicle.	<u> </u>	<u> </u>	ΨΞ,σσ. 10.
Attn: Bankruptcy I 6457 N 2nd St Loves Park, IL 611	•	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State &	Zip Code	☐ Unliquidated			
Who owes the debt? Check	one.	☐ Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only		An agreement you made (such as mortgage or sec car loan)	cured		
Debtor 1 and Debtor 2 only		☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors a	and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates community debt	to a	Other (including a right to offset)			
Date debt was incurred 3/1	/2016	Last 4 digits of account number 0613			

Add the dollar value of your entries in Column A on this page. Write that number here: \$13,957.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$13,957.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	0400 17 02071 1	Document	Page 18 of 55	0.23 Describent
Fill in this in	formation to identify your			
Debtor 1	Debbie D. Jones			
DODIOI 1	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	NORTHERN DISTRICT OF ILI	LINOIS	
Case number	r			
(if known)				☐ Check if this is an
				amended filing
Schedule		/ho Have Unsecured		12/15 ONPRIORITY claims. List the other party to
any executory Schedule G: Ex Schedule D: Cr eft. Attach the name and case	contracts or unexpired leases xecutory Contracts and Unexp reditors Who Have Claims Sec Continuation Page to this page number (if known).	that could result in a claim. Also I ired Leases (Official Form 106G). D ured by Property. If more space is le. If you have no information to re	ist executory contracts on Schedule A/B Do not include any creditors with partiall needed, copy the Part you need, fill it ou	3: Property (Official Form 106A/B) and on
	st All of Your PRIORITY Un			
	editors have priority unsecure	d claims against you?		
No. Go	to Part 2.			
☐ Yes.				
	st All of Your NONPRIORIT			
3. Do any cr	editors have nonpriority unsec	cured claims against you?		
☐ No. Yo	u have nothing to report in this p	art. Submit this form to the court with	your other schedules.	
Yes.				
unsecured	claim, list the creditor separately	y for each claim. For each claim listed	ne creditor who holds each claim. If a cred, identify what type of claim it is. Do not list have more than three nonpriority unsecured	claims already included in Part 1. If more
				Total claim
4.1 Ame	ericash Loans	Last 4 digits of acc	ount number	\$1,800.00
•	riority Creditor's Name			
4315	: Bankruptcy Dept. 5 E State St	When was the debt	: incurred?	
	kford, IL 61108 per Street City State Zlp Code	As of the date you	file, the claim is: Check all that apply	
	incurred the debt? Check one.	As of the date you	me, the claim is. Check all that apply	
_	ebtor 1 only	Пол		
	,	Contingent		
	ebtor 2 only	☐ Unliquidated		
	ebtor 1 and Debtor 2 only	☐ Disputed	DITY unacquired electric	
	least one of the debtors and and		RITY unsecured claim:	
☐ CI debt	heck if this claim is for a com	<u> </u>		
	claim subject to offset?	☐ Obligations arisir report as priority clai	ng out of a separation agreement or divorce ims	that you did not
■ No	<u>-</u>		n or profit-sharing plans, and other similar d	ebts
			1 01 /	
□ Ye	es	Other. Specify	rayuay Loan	

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Debtor 1 Debbie D. Jones Case number (if know) 4.2 **Anchor Group** Last 4 digits of account number \$2,203.00 Nonpriority Creditor's Name 630 North Church Street #101 When was the debt incurred? Rockford, IL 61103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Back Rent ☐ Yes 4.3 **Associated Bank** \$200.00 Last 4 digits of account number Nonpriority Creditor's Name 433 Main Street When was the debt incurred? Green Bay, WI 54301 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Debt owed** Other. Specify AT&T 4.4 Last 4 digits of account number \$500.00 Nonpriority Creditor's Name PO Box 6416 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Debt Owed ☐ Yes

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Case number (if know) Debtor 1 Debbie D. Jones 4.5 **Banquet Financial** Last 4 digits of account number \$2.538.38 Nonpriority Creditor's Name Attn: Bankruptcy Department When was the debt incurred? 1070 W Riverside Blvd #110 Rockford, IL 61103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Personal Loan ☐ Yes 4.6 **Chase Bank** Last 4 digits of account number \$1,000.00 Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. 340 S. Cleaveland Ave., Bldg. 370 Westerville, OH 43081 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Overdraft Fees** Other. Specify 4.7 **Chase Bank** Last 4 digits of account number \$500.00 Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. 340 S. Cleaveland Ave., Bldg. 370 Westerville, OH 43081 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Debt owed

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Case number (if know) Debtor 1 Debbie D. Jones 4.8 CNAC Last 4 digits of account number \$8.934.00 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 5695 E State St. Rockford, IL 61108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Auto Deficiency ☐ Yes 4.9 Comcast Last 4 digits of account number \$583.00 Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. PO Box 3005 Southeastern, PA 19398 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Utilities Other. Specify 4.1 Commonwealth Edison \$949.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: System Credit/BK Dept. When was the debt incurred? 3 Lincoln Center 4th Floor Oakbrook Terrace, IL 60181 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Utilities ☐ Yes

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Debi	or 1 Debbie D. Jones	Case number (if know)	
4.1 1	Direct TV	Last 4 digits of account number	\$500.00
	Nonpriority Creditor's Name		
	PO Box 5007	When was the debt incurred?	
	Carol Stream, IL 60197 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Debt Owed	
¥.1			
2	IDES	Last 4 digits of account number	\$2,649.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept.	When was the debt incurred?	
	PO Box 4385		
	Chicago, IL 60605		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Benefit Overpayment	
4.4			
4.1 3	Illinois Tollway	Last 4 digits of account number	\$3,000.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	Attn: Bankruptcy Dept. 2700 Ogden Ave	When was the dept incurred:	
	Downers Grove, IL 60515		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	<u> </u>	□ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	☐ Yes	■ Other. Specify Toll Fines	

Document Page 23 of 55 Case number (if know) Debtor 1 Debbie D. Jones 4.1 Lamps and more Flex Pay \$500.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3522 E State St. Rockford, IL 61108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Debt Owed ☐ Yes 4.1 **Nicor Gas** \$4,000.00 Last 4 digits of account number 5 Nonpriority Creditor's Name P.O. Box 549 When was the debt incurred? Aurora, IL 60507 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Utility Debt ☐ Yes 4.1 QC Financial Services/Quick Cash \$500.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 2228 Humes Rd. When was the debt incurred? Ste 2 Janesville, WI 53545 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify Debt Owed

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

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Case number (if know) Debtor 1 Debbie D. Jones 4.1 Rent-A-Center \$3,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. 3510 E State St. Rockford, IL 61108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Lease Agreement ☐ Yes 4.1 **Rockford Mercantile Agency** \$590.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 2502 S Alpine Rd Rockford, IL 61108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collecting for Creditor ☐ Yes 4.1 **Security Finance Central** \$400.00 9 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 1893 Spartanburg, SC 29304 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Debt owed ☐ Yes

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1 Debbie D. Jones	Case number (if know)	
Tempoe LLC	Last 4 digits of account number	\$906.00
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ300.00
1602 Tullamore Avenue Bloomington, IL 61704	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Extension	
US Bank	Last 4 digits of account number	\$500.00
Nonpriority Creditor's Name		• • • • • • • • • • • • • • • • • • • •
PO Box 790408	When was the debt incurred?	
Saint Louis, MO 63179	- Acceptant for a file of contract to the file of the	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_		
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Debt Owed	
Woodforest Bank		\$270.00
Nonpriority Creditor's Name	Last 4 digits of account number	\$270.00
Attn: Banruptcy Dept.	When was the debt incurred?	
3849 Northridge Dr Rockford, IL 61114		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
_	☐ Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other Specify Debt Owed	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Debbie D. Jones	Document rage	Case number (if know)
Name and Address Afni Attn: Bankruptcy Dept. PO Box 3097 Bloomington, IL 61702-3097	On which entry in Part 1 or Part 2 did Line 4.9 of (Check one):	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
_	Last 4 digits of account number	
Name and Address Allie Parker 241 River Haven Drive Dundee, IL 60118	On which entry in Part 1 or Part 2 did Line 4.8 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	-	
Name and Address Allied Collection Services, Inc. 3080 Durango Drive, Suite 208 Las Vegas, NV 89117	On which entry in Part 1 or Part 2 did Line 4.7 of (Check one):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Barrick, Switzer, Long, Balsley 6833 Stalter Drive 1st Floor Rockford, IL 61108	On which entry in Part 1 or Part 2 did Line 4.5 of (<i>Check one</i>): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address	On which entry in Part 1 or Part 2 did	Lyou list the original creditor?
Creditors Protection Service Attn: Bankruptcy Dept. PO Box 4115 Rockford, IL 61101	Line 4.10 of (Check one):	Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Equifax PO Box 740256 Atlanta, GA 30374	On which entry in Part 1 or Part 2 did Line 4.20 of (Check one):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Experian PO Box 4500 Allen, TX 75013	On which entry in Part 1 or Part 2 did Line 4.20 of (<i>Check one</i>):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address IDES Attn: Bankruptcy Dept. 303 N Main St #3 Rockford, IL 61101	On which entry in Part 1 or Part 2 did Line 4.12 of (Check one):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Mutual Management Services Co., LLC 7177 Crimson Ridge Dr., Suite 10 PO Box 8740	On which entry in Part 1 or Part 2 did Line 4.2 of (Check one):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Rockford, IL 61126-6235	Last 4 digits of account number	
Name and Address Stellar Recovery, Inc. Attn: Bankruptcy Dept. 1327 Highway 2 W, Suite 100 Kalispell, MT 59901	On which entry in Part 1 or Part 2 did Line 4.9 of (Check one):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address TransUnion 555 West Adams Street	On which entry in Part 1 or Part 2 did Line 4.20 of (Check one):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Chicago, IL 60661

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Debtor 1 Debbie D. Jones		Case number (if know)				
	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2	On which entry in Part 1 or Part 2 did you list the original creditor?				
Winnebago County Circuit Court	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
400 W State St 2017 SC 980 Rockford, IL 61101		■ Part 2: Creditors with Nonpriority Unsecured Claims				
	Last 4 digits of account number					

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				1	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				7	Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	36,022.38
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	36,022.38

			III FAU C ZO UL 33
Fill in this infor	mation to identify your	case:	
Debtor 1	Debbie D. Jones		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS
Case number			
(if known)			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	n whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3			Oldio	2.11 0000	
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5	·				
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u>—</u>

		Documer	<u>it Pade 29 of</u>	<u>55</u>
Fill in this infor	mation to identify your	case:		
Debtor 1	Debbie D. Jones			
200101 1	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fo	orm 106H			
	H: Your Code	ebtors		12/15
our name and	case number (if known).	Answer every question. you are filing a joint case, d	-	this page. On the top of any Additional Pages, write s a codebtor.
		lived in a community pro Nevada, New Mexico, Pue		? (Community property states and territories include gton, and Wisconsin.)
■ No. Go to	line 3.			
☐ Yes. Did	your spouse, former spou	ise, or legal equivalent live	with you at the time?	
in line 2 ag	ain as a codebtor only if), Schedule E/F (Official	that person is a guarant	or or cosigner. Make su	your spouse is filing with you. List the person shown are you have listed the creditor on Schedule D (Officia G). Use Schedule D, Schedule E/F, or Schedule G to fi
	nn 1: Your codebtor Number, Street, City, State and ZII	P Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
2812	nine Snow Rudeen Close, Apt. 3 aford, IL 61109	3		■ Schedule D, line □ Schedule E/F, line □ Schedule G Citizens Finance

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	in this information to identify your btor 1 Debbie D.									
	btor 2 puse, if filing)									
Un	ited States Bankruptcy Court for the	ne: NORTHERN DISTRIC	CT OF ILLINOIS							
_	se number nown)		-				amende uppleme	d filing ent showin	g postpetition	
<u>O</u>	fficial Form 106l					MM	/ DD/ Y	YYY		
S	chedule I: Your Inc	come								12/1
spo atta	plying correct information. If you are separated and you have a separate sheet to this form the separate sheet sheet to this form the separate sheet s	our spouse is not filing w . On the top of any additi	ith you, do not inclu	de infor	mati	on about yo	our spo ber (if I	ouse. If mo known). A	ore space is	needed,
	information.		_				Emplo		iiig spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed					mployed		
	employers.	Occupation	Custodian							
	Include part-time, seasonal, or self-employed work.	Employer's name	Aramark							
	Occupation may include studen or homemaker, if it applies.	Employer's address	215 18th Ave. Rockford, IL 61	104						
		How long employed t	here? 2 Year							
Pa	rt 2: Give Details About M	onthly Income								
	imate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to r	eport for	any	line, write \$6	0 in the	space. Inc	clude your no	n-filing
	ou or your non-filing spouse have it e space, attach a separate sheet		ombine the informatio	n for all	empl	oyers for tha	at perso	n on the li	nes below. If	you need
						For Debto	or 1		btor 2 or ng spouse	
2.	List monthly gross wages, sa deductions). If not paid monthly			2.	\$	1,22	26.70	\$	N/A	-
3.	Estimate and list monthly over	rtime pay.		3.	+\$		0.00	+\$	N/A	<u>-</u>
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$	1,226.	.70	\$	N/A	

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tor 1	Debbie D. Jones		C	ase i	number (<i>if known</i>)				
				For	Debtor 1				
Сор	y line 4 here	4.		\$	1,226.70	\$			
List	all payroll deductions:								
5a. 5b. 5c. 5d. 5e. 5f.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues	5b. 5c. 5d. 5e. 5f.		\$ \$ \$ \$ \$	96.48 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ \$		N/A N/A N/A N/A	- - - -
5h.	Other deductions. Specify:	_		· —		: -			-
Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	127.31	\$_		N/A	_
Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	1,099.39	\$_		N/A	_
List 8a.	Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	8a		\$	0.00	\$		N/Δ	
8b.	Interest and dividends				0.00	\$		N/A	-
8d. 8e. 8f.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive	8d. 8e.		\$	0.00 0.00 0.00	\$_ \$_ \$_			- - -
	that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Food Assistance	8f.		\$	649.00	\$_		N/A	
8g.	Pension or retirement income	_		· —	0.00	\$_			-
		_	Г	_		Ė			-
Calc	culate monthly income. Add line 7 + line 9.	Г	L			<u> </u>	N/A		1,748.39
Incluothe Do r	ude contributions from an unmarried partner, members of your household, your r friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a	depe		,	•	•	Schedule		0.00
Write	e that amount on the Summary of Schedules and Statistical Summary of Certain						e. 12.	\$	1,748.39
Do y	No.	?							ned y income
	Copp List 5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h. Add Calc List 8a. 8b. 8c. 8f. 8d. 8e. 8f. Add Statiother Dorr Special Calc Calc Calc Calc Calc Calc Calc Ca	Copy line 4 here List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5e. Insurance 5f. Domestic support obligations 5g. Union dues 5h. Other deductions. Specify: Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Calculate total monthly take-home pay. Subtract line 6 from line 4. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Food Assistance 8g. Pension or retirement income 8h. Other monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. State all other regular contributions to the expenses that you list in Schedule Include contributions from an unmarried partner, members of your household, your other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not a Specify: Add the amount in the last column of line 10 to the amount in line 11. The res Write that amount on the Summary of Schedules and Statistical Summary of Certai applies	Copy line 4 here 4. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Required repayments of retirement fund loans 5c. Insurance 5c. Insurance 5c. Domestic support obligations 5c. Sp. Union dues 5c. Journal of the payroll deductions. Specify: 5c. Other deductions. Specify: 5c. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6c. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7c. List all other income regularly received: 8a. Net income from rental property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. Social Security 8c. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Food Assistance 8g. Pension or retirement income 9g. She Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. Calculate monthly income. Add lines 7 + line 9. 10. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. Calculate monthly income and unmarried partner, members of your household, your dependent refineds or relatives. 100 not include any amounts already included in lines 2-10 or amounts that are not avails Specify: 8d that amount in the last column of line 10 to the amount in line 11. The result is Write that amount on the Summary of Schedules and Statistical Summary of Certain Lia applies	Copy line 4 here	Copy line 4 here	Copy line 4 here 4. \$ 1,226.70 List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5b. Mandatory contributions for retirement plans 5c. \$ 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 5d. Required repayments of retirement fund loans 5d. \$ 0.00 5f. Domestic support obligations 5f. \$ 0.00 5f. Domestic support obligations 5f. \$ 0.00 5g. Union dues 5g. \$ 30.83 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 127.31 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 1,099.39 List all other income regularly received: 8a. Not income from rental property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 8d. Unemployment compensation 8d. \$ 0.00 8d. Unemployment compensation 8d. \$ 0.00 8d. Social Security 8d. Social Sec	Copy line 4 here	Copy line 4 here 4. \$ 1,226.70 \$ For Debtor 1 non-filling s	Copy line 4 here

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Fill	in this informa	ition to identify yo	our case:			1		
	otor 1	Debbie D. Jo				Che	ck if this is:	
DCD	7.01 T	Debbie D. JC	nies				An amended filing	
	otor 2 ouse, if filing)						A supplement show 13 expenses as of	ving postpetition chapter
``							<u> </u>	
Unit	ed States Bankr	ruptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
	e number							
(II K	nown)							
O	fficial Fo	rm 106J						
S	chedule	J: Your	Exper	nses				12/1
Be info	as complete a	and accurate as	possible eded, atta	. If two married people ar ich another sheet to this				
Par 1.	t 1: Descr	ribe Your House	hold					
١.	No. Go to							
			in a separ	ate household?				
	□ N	0						
	ΠY	es. Debtor 2 mus	st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of Deb	otor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Daughter			■ Yes □ No
					Son		15	■ Yes
							_	□ No
					Son		18	Yes
								□ No □ Yes
3.		oenses include	_	No			_	□ res
		f people other t d your depende	han $_{\square}$	Yes				
Dor		ate Your Ongoi		ly Evnances				
Est exp	imate your ex	cpenses as of y	our bankr	uptcy filing date unless y y is filed. If this is a supp				
				government assistance i				
	ficial Form 10			naada it dii do neadie i. i	our moome		Your exp	enses
4.		or home owners		ses for your residence. I	nclude first mortgag	e 4. §	\$	350.00
	. ,	led in line 4:	-					
						40.0	3	0.00
		estate taxes erty, homeowner's	s, or renter	's insurance		4a. 9 4b. 9	·	0.00
	4c. Home	maintenance, re	epair, and ι	upkeep expenses		4c. S		0.00
5		owner's associa			mo oquity loops	4d. \$ 5. \$	·	0.00
5.	Additional f	nortgage paym	ents for yo	our residence, such as ho	me equity loans	5. 3	Þ	0.00

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Deb	otor 1	Debbie [D. Jones	Case num	ber (if known)	
6.	Utiliti	ies:				
٥.	6a.		, heat, natural gas	6a.	\$	100.00
	6b.		wer, garbage collection	6b.	· ·	0.00
	6c.		e, cell phone, Internet, satellite, and cable services	6c.	\$	100.00
	6d.	Other. Spe		6d.		0.00
7.	Food		ekeeping supplies	7.	\$	600.00
8.			children's education costs	8.	\$	0.00
9.	Cloth	hing, laund	ry, and dry cleaning	9.	\$	25.00
10.		-	products and services	10.	\$	25.00
		-	ntal expenses	11.		0.00
12.	Trans	sportation.	Include gas, maintenance, bus or train fare.			
	Do no	ot include c	ar payments.	12.	\$	150.00
13.	Ente	rtainment,	clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Char	itable cont	ributions and religious donations	14.	\$	0.00
15.	Insur					
			ssurance deducted from your pay or included in lines 4 or 2		Φ.	
		Life insura		15a.	·	0.00
		Health ins		15b.		0.00
		Vehicle in:		15c.	·	104.00
4.0			Irance. Specify:	15d.	\$	0.00
16.	Spec		clude taxes deducted from your pay or included in lines 4	or 20. 16.	¢	0.00
17		,	ease payments:		Φ	0.00
17.			ents for Vehicle 1	17a.	\$	268.00
			ents for Vehicle 2	17b.	·	0.00
		Other. Spe	ocify:	170	·	0.00
		Other. Spe		17d.		0.00
18			of alimony, maintenance, and support that you did no		Ψ	0.00
10.			your pay on line 5, Schedule I, Your Income (Official Fo		\$	0.00
19.			s you make to support others who do not live with you		\$	0.00
	Spec	cify:		19.		
20.	Othe	r real prop	erty expenses not included in lines 4 or 5 of this form	or on Schedule I: Yo	our Income.	
	20a.	Mortgages	s on other property	20a.	\$	0.00
	20b.	Real estat	re taxes	20b.	\$	0.00
	20c.	Property, I	homeowner's, or renter's insurance	20c.	\$	0.00
	20d.	Maintenar	nce, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeown	er's association or condominium dues	20e.	\$	0.00
21.	Othe	r: Specify:		21.	+\$	0.00
22	Calci	ulate vour	monthly expenses			
22.			through 21.		\$	1,722.00
			2 (monthly expenses for Debtor 2), if any, from Official For	m 106.l-2	\$	1,722.00
				111 1000 2	\$	4 700 00
	220. /	Auu IIIle 22	a and 22b. The result is your monthly expenses.		Φ	1,722.00
23.	Calc	ulate your	monthly net income.			
	23a.	Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	1,748.39
	23b.	Copy your	monthly expenses from line 22c above.	23b.	-\$	1,722.00
	23c.		our monthly expenses from your monthly income.	220	¢	26.39
		The result	is your monthly net income.	23c.	\$	20.03
24	Do v	OII AYDACT	an increase or decrease in your expenses within the ye	ar after you file this	form?	
4 4.			ou expect to finish paying for your car loan within the year or do you			ase or decrease because of a
			terms of your mortgage?	, ,	, , , , , , , , , , , , , , , , , , , ,	
	■ No	0.				
	ПУ		Explain here:			

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Fill in this info	rmation to identify your	case.			
Debtor 1	Debbie D. Jones	ouse.			
Debior 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					Check if this is an amended filing
You must file thobtaining mone		le bankruptcy schedules	s or amended schedule	s. Making a false statemer	nt, concealing property, or imprisonment for up to 20
Sig	gn Below				
Did you p	ay or agree to pay some	one who is NOT an atto	rney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes.	Name of person				cy Petition Preparer's Notice, I Signature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the sum	nmary and schedules fil	ed with this declaration ar	d
X /s/ De	ebbie D. Jones		X		
	ie D. Jones		Signature of	f Debtor 2	
Signat	ture of Debtor 1				
Date	December 6, 2017		Date		

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		nation to identify you					
De	btor 1	Debbie D. Jones First Name	Middle Name	Last Name			
1 -	btor 2						
(Spo	ouse if, filing)	First Name	Middle Name	Last Name			
Uni	ited States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS			
1	se number					_	neck if this is an nended filing
St		of Financial	Affairs for Indivi				4/1
info	rmation. If m		ble. If two married people attach a separate sheet to stion.				
Pai	rt 1: Give D	etails About Your Ma	rital Status and Where You	Lived Before			
1.	What is you	current marital statu	s?				
	☐ Married						
	■ Not mar	ried					
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?			
	□ No						
	Yes. Lis	t all of the places you l	ived in the last 3 years. Do n	ot include where you live	now.		
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior	Address:		Dates Debtor 2 lived there
	2807 Silen Rockford,	t Wood Trail #4 IL 61108	From-To: 8/2014 - 8/201	☐ Same as Deb	tor 1		☐ Same as Debtor 1 From-To:
	es and territori No Yes. Ma	es include Arizona, Ca	ver live with a spouse or leg lifornia, Idaho, Louisiana, Ne nedule H: Your Codebtors (O	vada, New Mexico, Puert			
Pai	rt 2 Explai	n the Sources of You	r Income				
4.	Fill in the tota	al amount of income yo	nployment or from operatir u received from all jobs and have income that you receiv	all businesses, including p	part-time activities.	ous calen	dar years?
	□ No ■ Yos Fill	in the details.					
	— 165. Fill	in the details.					
			Debtor 1	One see in seems	Debtor 2		One se in serve
			Sources of income Check all that apply.	Gross income (before deductions an exclusions)	Sources of incon Check all that app		Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$1,633.0	2 ☐ Wages, commi bonuses, tips	ssions,	
			☐ Operating a business		☐ Operating a bu	siness	

Official Form 107

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Debtor 1 Debbie D. Jones

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2016)	■ Wages, commissions, bonuses, tips	\$14,720.36	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
	☐ Wages, commissions, bonuses, tips	\$4,349.00	☐ Wages, commissions, bonuses, tips	
	■ Operating a business		☐ Operating a business	
For the calendar year before that: (January 1 to December 31, 2015)	■ Wages, commissions, bonuses, tips	\$7,717.00	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
	☐ Wages, commissions, bonuses, tips	\$5,921.00	☐ Wages, commissions, bonuses, tips	
	Operating a business		☐ Operating a business	
☐ No☐ Yes. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	SNAP/LINK/Food Stamps	\$3,245.00		
	Disability	\$3,509.00		
For last calendar year: (January 1 to December 31, 2016)	SNAP/LINK/Food Stamps	\$7,788.00		
For the calendar year before that: (January 1 to December 31, 2015)	SNAP/LINK/Food	\$7,788.00		
	Stamps	\$7,766.00		
Part 3: List Certain Payments You	Stamps			
6. Are either Debtor 1's or Debtor 2	Made Before You Filed for 's debts primarily consume Debtor 2 has primarily consume	Bankruptcy r debts? umer debts. Consumer debts	s are defined in 11 U.S.C. § 10	1(8) as "incurred by an
6. Are either Debtor 1's or Debtor 2 No. Neither Debtor 1 nor E individual primarily for a	Made Before You Filed for 's debts primarily consume Debtor 2 has primarily consume personal, family, or househo per you filed for bankruptcy, di	Bankruptcy r debts? umer debts. Consumer debts ld purpose."		1(8) as "incurred by an

Official Form 107

not include payments to an attorney for this bankruptcy case.

paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do

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	* Subject	to adjustment on 4/01/1	9 and every 3 years after t	hat for cases filed on	or after the date of	of adjustment.	
			ve primarily consumer de d for bankruptcy, did you p		al of \$600 or more?	?	
	■ No.	Go to line 7.					
	□ _{Yes}		tor to whom you paid a tota domestic support obligation ruptcy case.				
	Creditor's Name and	d Address	Dates of payment	Total amount paid	Amount you still owe	Was this pay	ment for
7.	Insiders include your of which you are an of a business you operate alimony.	elatives; any general pa fficer, director, person in te as a sole proprietor.	ccy, did you make a payme artners; relatives of any ger a control, or owner of 20% of 11 U.S.C. § 101. Include pa	neral partners; partners partners or more of their voting	erships of which yo g securities; and a	u are a general ny managing ag	partner; corporations ent, including one for
	☐ Yes. List all payr	nents to an insider.	Dates of payment	Total amount	Amount vou	Reason for the	nia naumant
	ilisidei s Naille alid	Address	Dates of payment	paid	Amount you still owe	Neason for th	iis payment
Pa 1	Insider's Name and t 4: Identify Legal a Within 1 year before List all such matters, i modifications, and cor	Actions, Repossessio you filed for bankrupt ncluding personal injury ntract disputes.	Dates of payment ns, and Foreclosures ccy, were you a party in ar cases, small claims action				or's name
	Yes. Fill in the de	etails.					
	Case title Case number		Nature of the case	Court or agency		Status of the case	
	Banquet Financia 2017 SC 980	l v. Debbie Jones	Contract	Winnebago Co Court 400 W State St Rockford, IL 61	-	Pending On appea Concluded	
10.		nd fill in the details belo	cy, was any of your prop w.	erty repossessed, f	oreclosed, garnis	shed, attached,	seized, or levied?
	Creditor Name and		Describe the Property		Date		Value of the
			Explain what happene	d			property

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	Creditor Name and Address	Describe the Property	Date	Value of the property
		Explain what happened		property
	CNAC Attn: Bankruptcy Dept.	2005 Buick Rendezvous	3/2017	\$4,475.00
	5695 E State St.	■ Property was repossessed.		
	Rockford, IL 61108	Property was foreclosed.		
		☐ Property was garnished.		
		☐ Property was attached, seized or levied.		
	Citizens Finance Attn: Bankruptcy Dept.	2014 Chevrolet Malibu 72,000 miles	10/2017	\$11,100.00
	6457 N 2nd St	■ Property was repossessed.		
	Loves Park, IL 61111	☐ Property was foreclosed.		
		☐ Property was garnished.		
		☐ Property was attached, seized or levied.		
11.	accounts or refuse to make a payment be No Yes. Fill in the details. Creditor Name and Address	uptcy, did any creditor, including a bank or financial in ecause you owed a debt? Describe the action the creditor took	Date action was	Amount
			taken	
	court-appointed receiver, a custodian, or ■ No □ Yes	ptcy, was any of your property in the possession of an another official?	Ū	,
Par	t 5: List Certain Gifts and Contribution	S		
13.	Within 2 years before you filed for bankr	uptcy, did you give any gifts with a total value of more	than \$600 per person	?
	☐ Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$60 per person	0 Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankro ■ No ■ Yes. Fill in the details for each gift or c	uptcy, did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that t		Dates you	Value
	more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	ŕ	contributed	value
Par	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankru or gambling?	ptcy or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,
	□ No			
	Yes. Fill in the details.			
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property	Date of your loss	Value of property lost

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Describe the property you lost and how the loss occurred		Include	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.		Date of your loss	Value of property lost	
	2005 Buick Rendezvous, vehicle broken into.		modules diamic of mic of a constant 772. 116porty.			\$200.00	
Par	t 7: List Certain Payments or Transfe	rs					
16.	Within 1 year before you filed for bankr consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition	preparin	ng a bankruptcy petition?	. ,	,, ,	rty to anyone you	
	□ No						
	Yes. Fill in the details.						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment	
	001DebtorCC 378 Summit Ave. Jersey City, NJ 07306 www.debtorcc.org		\$14.95		5/1/2017	\$14.95	
	Springer Law Firm 2222 E State St, Suite 107 Rockford, IL 61104		\$500.00		5/2017	\$500.00	
 Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you No 		editors or	to make payments to your creditor		r transfer any prope	rty to anyone who	
	Yes. Fill in the details. Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment	
18.	Within 2 years before you filed for bank transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have a No Yes. Fill in the details.	our businers made a	ess or financial affairs? as security (such as the granting of a se				
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made	
	Person's relationship to you						
19.	Within 10 years before you filed for ban beneficiary? (These are often called asset ■ No ■ Yes. Fill in the details.			elf-settled tru	st or similar device	of which you are a	
	Name of trust		Description and value of the prope	erty transferre	ed	Date Transfer was made	

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Debtor 1 Debbie D. Jones Debtor 1 Debbie D. Jones Debtor 1 Debtor

Ра 20.	List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?								
	Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No								
	Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
	Fifth Third Bank 3154 McFarland Road Rockford, IL 61114	XXXX-	■ Checking □ Savings □ Money Ma □ Brokerage □ Other			\$0.00			
	Woodforest Bank Attn: Banruptcy Dept. 3849 Northridge Dr Rockford, IL 61114	xxxx-	■ Checking □ Savings □ Money Ma □ Brokerage □ Other			\$0.00			
	Associated Bank 612 North Main Street Rockford, IL 61103	xxxx-	■ Checking □ Savings □ Money Ma □ Brokerage □ Other			\$0.00			
21.	Do you now have, or did you have within 1 cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	year before you filed f Who else had a Address (Number State and ZIP Code)	ccess to it?		eposit box or other depo	Do you still have it?			
22.	Have you stored property in a storage unit No Yes. Fill in the details.	,	ur home within	l year befo	ore you filed for bankrup	otcy?			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has o to it? Address (Number State and ZIP Code)		Describe	the contents	Do you still have it?			
Pa	rt 9: Identify Property You Hold or Contro	ol for Someone Else							
23.			clude any prope	rty you bo	rrowed from, are storing	g for, or hold in trust			
	Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City Code)		Describe	the property	Value			

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ase number (if known)

Debtor 1 Debbie D. Jones

Owner's Name Where is the property? Describe the property Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Allie Parker 2712 Ridge Avenue 2012 Chevrolet Malibu with \$9,200.00 241 River Havens Drive Rockford, IL 61103 36.000 miles financed through Dundee, IL 60118 Santander with a balance of over \$10.000 Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Nο ☐ Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Date of notice Name of site Governmental unit Environmental law, if you Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency **Case Number** Name case Address (Number, Street, City, Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)

■ A partner in a partnership

☐ An officer, director, or managing executive of a corporation

☐ An owner of at least 5% of the voting or equity securities of a corporation

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	No. None of the above applies. Go to I	Part 12.	
		in the details below for each business.	
Add	siness Name dress nber, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
Da	ycare	Daycare	EIN:
			From-To 2013-2016
	nin 2 years before you filed for bankrupt itutions, creditors, or other parties. No Yes. Fill in the details below.	ccy, did you give a financial statement to a	nyone about your business? Include all financial
	me dress nber, Street, City, State and ZIP Code)	Date Issued	
Part 12:	Sign Below		
are true a with a ba 18 U.S.C	and correct. I understand that making a		declare under penalty of perjury that the answers btaining money or property by fraud in connection ars, or both.
	D. Jones re of Debtor 1	Signature of Debtor 2	
Date [December 6, 2017	Date	
Did you a ■ No □ Yes	attach additional pages to Your Stateme	ent of Financial Affairs for Individuals Filin	g for Bankruptcy (Official Form 107)?
Did you ¡ ■ No	pay or agree to pay someone who is no	t an attorney to help you fill out bankruptc	y forms?
	lame of Person Attach the Bankru	ptcy Petition Preparer's Notice, Declaration, a	and Signature (Official Form 119).

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			· ·				
Fill in this infor	mation to identify your	case:					
Debtor 1	Debbie D. Jones						
Debtor 1	First Name	Middle Name	Last Name				
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS				
Case number (if known)				☐ Check if this is an amended filing			
	Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7						
If you are an individual filing under chapter 7, you must fill out this form if: ■ creditors have claims secured by your property, or ■ you have leased personal property and the lease has not expired. You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list							
on the	on the form two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.						

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Creditor's	☐ Surrender the property.	□ No
name: Description of	 Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. 	Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1	Debbie D. Jones	Case number (if known)	
name:		☐ Retain the property and redeem it.☐ Retain the property and enter into a	□ Yes
Descrip		Reaffirmation Agreement.	
propert securin	ry ng debt:	☐ Retain the property and [explain]:	-
For any u	ormation below. Do not list real estate	erty Leases at you listed in Schedule G: Executory Contracts and Unexpired e leases. Unexpired leases are leases that are still in effect; the erty lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Describe	your unexpired personal property le	eases	Will the lease be assumed?
Lessor's r	name:		□ No
Description Property:	on of leased		☐ Yes
Lessor's r	name:		□ No
Description	on of leased		□ NO
Property:			☐ Yes
Lessor's r			□ No
Property:	on of leased		☐ Yes
Lessor's r			□ No
Property:	on of leased		☐ Yes
Lessor's r	name: on of leased		□ No
Property:			☐ Yes
Lessor's r			□ No
Property:	on of leased		☐ Yes
Lessor's r			□ No
Property:	on of leased		☐ Yes
Part 3:	Sign Below		
	nalty of perjury, I declare that I have i hat is subject to an unexpired lease.	indicated my intention about any property of my estate that sec	cures a debt and any personal
	Debbie D. Jones	x	
	obie D. Jones lature of Debtor 1	Signature of Debtor 2	
Date	December 6, 2017	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-82871 Doc 1 Filed 12/06/17 Entered 12/06/17 12:50:29 Desc Main Document Page 49 of 55

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Debbie D. Jones		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR DE	BTOR(S)
С	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 ompensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy	, or agreed to be paid t	o me, for services rendered or to
	For legal services, I have agreed to accept		\$	500.00
	Prior to the filing of this statement I have received		\$	500.00
	Balance Due		\$	0.00
2. T	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3. Т	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4. I	I have not agreed to share the above-disclosed comp	pensation with any other person	unless they are memb	ers and associates of my law firm
I	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na			
5. 1	in return for the above-disclosed fee, I have agreed to re	ender legal service for all aspec	ts of the bankruptcy ca	ase, including:
b c	 Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, stated Representation of the debtor at the meeting of credited [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on home 	tement of affairs and plan which ors and confirmation hearing, a reduce to market value; ex ons as needed; preparatior	h may be required; nd any adjourned hear emption planning;	ings thereof; preparation and filing of
6. E	By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any dis any other adversary proceeding.	te does not include the followin schargeability actions, jud	g service: icial lien avoidance	s, relief from stay actions o
		CERTIFICATION		
	certify that the foregoing is a complete statement of an ankruptcy proceeding.	ny agreement or arrangement fo	r payment to me for re	presentation of the debtor(s) in
De	ecember 6, 2017	/s/ Daniel A. Spri		
Do	ate	Daniel A. Spring Signature of Attorn Springer Law Fir 5301 E. State Str Suite 105	ey rm reet	
		Rockford, IL 611 815.312.4725	U8	
		dspringerlaw@g	mail.com	
		Name at law tirm		

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Springer Law Firm

2222 East State St. # 107, Rockford, IL

815.312.4725

CHAPTER 7 RETAINER AGREEMENT

The undersigned agrees to hire Springer Law Firm to represent the undersigned in a Chapter 7 bankruptcy and agrees to the following terms and conditions:

- 1. The attorney fees for the Chapter 7 bankruptcy are \$500. This is a flat fee arrangement, and does not include the court costs, which are currently \$335. This is the total of your attorney fees, and Springer Law Firm will not charge you for additional work. However, if you refuse to cooperate, or fail to provide information as requested by our attorney, your case may be closed.
- 2. Fees paid to the firm become property of the firm upon payment. If before the case is filed, you decide to close out your case, Springer Law Firm will refund you any fees not earned. I assign to Springer Law Firm any amount paid towards court costs and filing fees. I authorize Springer Law Firm to transfer said funds to the firm's operating account if I decide not to file for bankruptcy, or if I breach this contract.
- 3. I agree to disclose all pertinent information to Springer Law Firm, so that the firm can properly disclose all my assets, debts, and financial history to the court. I agree to keep the firm informed on any new assets or debts I may incur from this date forward. If I do not provide the proper information, or do not cooperate with Springer Law Firm, said firm may withdraw from representation, with permission of the court.
- 4. I understand that I may not be able to protect all of my property. The bankruptcy code does not provide exemptions for everything, and as such, some of my property may be taken by the Trustee and sold. Additionally, if my income is too high, or if my income is not offset enough by my expenses. I understand that the Trustee may dismiss my case, or require me to file a Chapter 13 instead of a Chapter 7.
- 5. I understand that not all of my debts may be discharged in a Chapter 7 bankruptcy. Student loans, educational debts, undisclosed debt, support/maintenance, fines, debts incurred by fraud, future association/condo HOA dues, certain tax debts, or debts found non-dischargeable by a Judge are among the debts not dischargeable.
- 6. I understand that this retainer agreement is for bankruptcy representation only. Springer Law Firm will not represent me in any other case or legal matter, unless agreed to in a separate retainer agreement. This includes adversary proceedings that may fall under the bankruptcy case. This agreement does not include representation in such adversary proceedings.
- 7. I understand that all money paid towards attorney fees is non-refundable. I understand that once I pay Springer Law, that Springer Law begins work on my case. I understand that the majority of bankruptcy work is done prior to the filing of the case, and because of this the fees are earned even before the filing of the case.
- 8. I understand that before I transfer or sell any property, or incur any new debt, I will first notify Springer Law Firm and consult on the impact such action will have on my bankruptcy.
- 9. I understand that I must take 2 classes pertaining to financial management and credit counselling. Failure to take these courses will result in either my case NOT being filed, or if filed, possibly dismissed. If my case is dismissed, I understand that I will have to pay to have my case re-opened by Springer Law Firm.

10. I have received the 11 U.S.C. § 527(a) disclosures and have read them.

Attorney Signature:

Attorney Print:

United States Bankruptcy Court Northern District of Illinois

In re	Debbie D. Jones		Case No.	
		Debtor(s)	Chapter 7	
	VERIFICATION OF CREDITOR MATRIX			
		Number of Creditors: 35		
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.			
Date:	December 6, 2017	/s/ Debbie D. Jones Debbie D. Jones Signature of Debtor		

Afni Attn: Bankruptcy Dept. PO Box 3097 Bloomington, IL 61702-3097

Allie Parker 241 River Haven Drive Dundee, IL 60118

Allied Collection Services, Inc. 3080 Durango Drive, Suite 208 Las Vegas, NV 89117

Americash Loans Attn: Bankruptcy Dept. 4315 E State St Rockford, IL 61108

Anchor Group 630 North Church Street #101 Rockford, IL 61103

Associated Bank 433 Main Street Green Bay, WI 54301

AT&T PO Box 6416 Carol Stream, IL 60197

Banquet Financial Attn: Bankruptcy Department 1070 W Riverside Blvd #110 Rockford, IL 61103

Barrick, Switzer, Long, Balsley 6833 Stalter Drive 1st Floor Rockford, IL 61108

Chase Bank Attn: Bankruptcy Dept. 340 S. Cleaveland Ave., Bldg. 370 Westerville, OH 43081 Citizens Finance Attn: Bankruptcy Dept. 6457 N 2nd St Loves Park, IL 61111

CNAC Attn: Bankruptcy Dept. 5695 E State St. Rockford, IL 61108

Comcast
Attn: Bankruptcy Dept.
PO Box 3005
Southeastern, PA 19398

Commonwealth Edison Attn: System Credit/BK Dept. 3 Lincoln Center 4th Floor Oakbrook Terrace, IL 60181

Creditors Protection Service Attn: Bankruptcy Dept. PO Box 4115 Rockford, IL 61101

Direct TV PO Box 5007 Carol Stream, IL 60197

Equifax PO Box 740256 Atlanta, GA 30374

Experian PO Box 4500 Allen, TX 75013

IDES Attn: Bankruptcy Dept. PO Box 4385 Chicago, IL 60605

IDES Attn: Bankruptcy Dept. 303 N Main St #3 Rockford, IL 61101 Illinois Tollway Attn: Bankruptcy Dept. 2700 Ogden Ave Downers Grove, IL 60515

Jasmine Snow 2812 Rudeen Close, Apt. 3 Rockford, IL 61109

Lamps and more Flex Pay 3522 E State St. Rockford, IL 61108

Mutual Management Services Co., LLC 7177 Crimson Ridge Dr., Suite 10 PO Box 8740 Rockford, IL 61126-6235

Nicor Gas P.O. Box 549 Aurora, IL 60507

QC Financial Services/Quick Cash 2228 Humes Rd. Ste 2
Janesville, WI 53545

Rent-A-Center Attn: Bankruptcy Dept. 3510 E State St. Rockford, IL 61108

Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108

Security Finance Central Attn: Bankruptcy Dept. PO Box 1893 Spartanburg, SC 29304

Stellar Recovery, Inc. Attn: Bankruptcy Dept. 1327 Highway 2 W, Suite 100 Kalispell, MT 59901 Tempoe LLC 1602 Tullamore Avenue Bloomington, IL 61704

TransUnion 555 West Adams Street Chicago, IL 60661

US Bank PO Box 790408 Saint Louis, MO 63179

Winnebago County Circuit Court 400 W State St 2017 SC 980 Rockford, IL 61101

Woodforest Bank Attn: Banruptcy Dept. 3849 Northridge Dr Rockford, IL 61114